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PATENT
Attorney Docket No.: 015358-005500US
Client Ref. No.: ID-RSV-197

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On

TOWNSEND and TOWNSEND and CREW LLP

By:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

JAMEY GRAHAM

Application No.: 09/348,652

Filed: July 6, 1999

For: METHOD AND SYSTEM FOR
CREATING A DOCUMENT INTEREST
PROFILE

Customer No.: 20350

Confirmation No. 5555

Examiner: Cesar B. Paula

Technology Center/Art Unit: 2178

AMENDMENT

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed February 24, 2004, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 12 of this paper.

06/30/2004 CCHAU1 00000067 201430 09348652

02 FC:1202 18.00 DA
03 FC:1201 86.00 DA



2127

TPW

PTO/SB/21 (02-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/348,652	
	Filing Date	July 6, 1999	
	First Named Inventor	Graham, Jamey	
	Art Unit	2178	
	Examiner Name	Cesar B. Paula	
Total Number of Pages in This Submission	22	Attorney Docket Number	15358-005500US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Townsend and Townsend and Crew LLP Sujit B. Kotwal Reg. No. 43,336	
Signature	S. B. Kotwal	
Date	June 24, 2004	

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Krista K. Merrimac		
Signature		Date	June 24, 2004